

PATENT APPLICATION
DOCKET NO. T6825.DIV I

IN THE UNITED STATES PATENT & TRADEMARKS OFFICE

ART UNIT: 2672
EXAMINER: Good Johnson, Motilewa
APPLICANT: Michael Cosman
SERIAL NO.: 09/812,366
FILED: March 20, 2001
CONFRM. NO.: 2802
FOR: ANTI-ALIASED, TEXTURED, GEOCENTRIC
AND LAYERD FOG GRAPHICS DISPLAY
METHOD AND APPARATUS

PETITION FOR EXTENSION OF
TIME UNDER 37 CFR 1.136(a)

CERTIFICATE OF DELIVERY

DATE OF DEPOSIT: August 20, 2004

I hereby certify that this paper or fee (along with any paper or fee referred to as being attached or enclosed) is being sent via facsimile to the Commissioner for Patents, Attention Examiner Motilewa Good Johnson, facsimile no. (703) 872-9306 on the date indicated above.

Steve M. Perry
Steve M. Perry

VIA FACSIMILE

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir/Madam:

This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application for one month(s).

- ☒ Applicant claims small entity status under 37 CFR 1.9(b) & 1.27(c).
- ☐ A check including the extension fee of _____ is enclosed.
- ☒ The Commissioner is hereby authorized to charge the \$ 55.00 fee to Deposit Account Number 20-0100.
- ☒ The Commissioner is hereby authorized to charge any additional fees which may be required, except the issue fee, or credit any overpayment, to Deposit Account Number 20-0100.

Dated this 20th day of August, 2004.

Respectfully submitted,

Steve M. Perry
Steve M. Perry
Attorney for Applicant
Registration No. 45,357

THORPE NORTH & WESTERN, LLP
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SMP/sbh
Enclosure
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10/06/2004 LDIGGS 00000005 200100 09812366

01 FC:2251 55.00 DA

09/8/23/66

PATENT APPLICATION FEE DETERMINATION RECORD
Effective October 1, 2000

Application or Docket Number

T6825.DIVI

CLAIMS AS FILED - PART I

	(Column 1)	(Column 2)
TOTAL CLAIMS	27	
FOR	NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS	27 minus 20 =	7
INDEPENDENT CLAIMS	1 minus 3 =	0
MULTIPLE DEPENDENT CLAIM PRESENT <input type="checkbox"/>		

* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

02-12-04

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT A	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	26	27	0
Independent	1	3	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

08-20-04

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT B	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	23	27	0
Independent	1	3	0
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

	(Column 1)	(Column 2)	(Column 3)
AMENDMENT C	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
Total	-	-	-
Independent	-	-	-
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>			

* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
 ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."
 *** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."
 The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

SMALL ENTITY TYPE ☐

RATE	FEE
BASIC FEE	355.00
X\$ 9=	
X40=	
+135=	
TOTAL	

OR OTHER THAN SMALL ENTITY

RATE	FEE
BASIC FEE	710.00
X\$18=	126
X80=	-
+270=	-
TOTAL	836

SMALL ENTITY

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL	

OR OTHER THAN SMALL ENTITY

RATE	ADDITIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL	

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL	

RATE	ADDITIONAL FEE
X\$18=	0
X80=	0
+270=	0
TOTAL	0

RATE	ADDITIONAL FEE
X\$ 9=	
X40=	
+135=	
TOTAL	

RATE	ADDITIONAL FEE
X\$18=	
X80=	
+270=	
TOTAL	

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